

**TRANSMITTAL OF UTILITY  
APPLICATION UNDER 37 C.F.R. §1.53**

Attorney Docket No. 40070-0360

First named inventor D. Darst

Express mail label # EV338078419US

Date of mailing September 25, 2003

03945 U.S. PRO  
10/672239  
09/25/03



<b>Application Elements</b>		<b>Accompanying Application Papers</b>
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification containing 32 pages (including Claims and Abstract). <ul style="list-style-type: none"> <li>a. Title: PILL BOX AND SPLITTER WITH BLADE GUARD</li> <li>b. Number of claims: 72</li> </ul> 3. <input checked="" type="checkbox"/> 10 sheets of drawings 4. <input type="checkbox"/> Declaration 5. <input type="checkbox"/> Sequence Listing <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper copy (identical to computer copy)</li> <li><input type="checkbox"/> Computer readable copy</li> <li><input type="checkbox"/> Verified statement</li> </ul>		6. <input type="checkbox"/> Copy of assignment documents from parent applications 7. <input type="checkbox"/> Preliminary Amendment 8. <input checked="" type="checkbox"/> Return Receipt Postcard 9. <input type="checkbox"/> Small Entity Statement 10. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.
<b>SIGNATURE OF ATTORNEY/AGENT</b>		
HELLER EHRLMAN WHITE & McAULIFFE LLP  Fred C. Hernandez Registration Number: 41,832		

Benefit of priority:

**CORRESPONDENCE ADDRESS**

NAME	Stephanie L. Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe LLP	
Address	4350 La Jolla Village Drive, 7th Floor, San Diego, CA 92122-1246	
	Telephone: (858) 450-8400	Facsimile: (858) 587-5360

<b>FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53</b>	Attorney Docket No.	40070-0360
	First named inventor	D. Darst
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### FEE CALCULATION FOR CLAIMS AS AMENDED

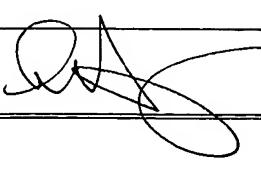
a)	Basic Fee	\$750/\$375	\$ 750.00
b)	Independent Claims	$\frac{6}{6} - \frac{3}{3} = \frac{3}{3} \times \$84/\$42$	\$ 126.00
c)	Total Claims	$\frac{72}{72} - \frac{20}{20} = \frac{52}{52} \times \$18/\$9$	\$ 468.00
d)	Fee for Multiple Dependent Claims	\$280/\$140	\$ 0.00
		<b>TOTAL FILING FEE</b>	<b>\$1344.00</b>

Applicant is a small entity.

A check is enclosed in the amount of \$1344.00 to cover the fee for filing the application.

Charge \$\_\_\_\_\_ to Deposit Account No. 50-1213.

The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

<b>CORRESPONDENCE ADDRESS</b>				
NAME	Stephanie L. Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe LLP			
Address	4350 La Jolla Village Drive, 7th Floor, San Diego, CA 92122-1246			
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Submitted by:				
Typed or printed name	Fred C. Hernandez			Reg. Number 33,779
Signature		Date 9/25/03	Deposit Account 50-1213	